



IS EG HALAL GLOBAL

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IS EG HALAL AUDIT FORM

Establishment Information

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| Establishment Name: | |
| Establishment Number: | |
| Country: | |
| Audit Date: | |
| Audit Time: | |

Product types:(Check If applicable)

- Beef Offal (Liver-Kidney-Heart)
- Beef Meat
- Beef Fat
- Veal
- Lamb/Mutton
- Casings
- Poultry
- Others

Please Indicate:

Documents and Data

| General Information: | |
|---|--|
| 1-When was the establishment created? | Date: <input type="text"/> |
| 2-What are the latest developments, improvements, and modifications of the establishment? | a) <input type="text"/> b) <input type="text"/> c) <input type="text"/> |
| 3- Is there any change that affects the Halal Policy? | Yes <input type="checkbox"/> No <input type="checkbox"/> Description: <input type="text"/> |
| a) Establishment Management | a) Yes <input type="checkbox"/> No <input type="checkbox"/> Description: <input type="text"/> |
| b) Halal Assurance System (SOPs, documents, personnel, etc.) | b) Yes <input type="checkbox"/> No <input type="checkbox"/> Description: <input type="text"/> |
| c) Establishment Location | c) Yes <input type="checkbox"/> No <input type="checkbox"/> Description: <input type="text"/> |

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| 4-Has the establishment been previously audited by any Arab, Muslim, or foreign country? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 5-If yes, list them. | Countries: _____ |
| 6-Has the establishment exported to any of these countries? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 7-If yes, list them. | Countries: _____ |
| 8-What are the current exporting countries you affiliate with? | Countries: _____ |
| 9-Has Egypt previously audited the establishment? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 10-If yes, provide the date. | Date: _____ |
| 11-Has the establishment previously exported to Egypt? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 12-If yes, provide the date. | Date: _____ |
| 13-What are the present export percentages to external and internal markets? | External Market <input type="checkbox"/> %. Internal Market <input type="checkbox"/> %. |
| Slaughtering and Processing | |
| 14- What are the establishment's slaughtered animal species? | Types of Slaughtered Species: _____ |
| 15- What are the ritual slaughters at the slaughterhouse? | <input type="checkbox"/> Halal <input type="checkbox"/> Others Name: _____ |
| 16- When was the last time of ritual slaughter? | Date of last ritual slaughter: _____ |
| 17- Is there any method of Stunning (Loss of Consciousness/Dizziness/Fainting) of animals? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 18- If yes, provide details. | Details: _____ |
| 19- How many cameras are at the stunning and slaughtering areas? | Total number of cameras: <input type="checkbox"/> Attach clear photos <input type="checkbox"/> |
| 20- Does the facility employ mechanical slaughtering methods in its operations for poultry? | Yes <input type="checkbox"/> No <input type="checkbox"/> |

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| 21- Will the Halal slaughtering procedure be carried out using mechanical methods and/or manually by hand? | <input type="checkbox"/> Mechanical methods <input type="checkbox"/> Manually |
| 22- If mechanical slaughtering is utilized, what specific procedures are in place to ensure it aligns with Halal requirements? | Clarify: _____ |
| Certification and Compliance | |
| 23-Has the establishment been previously Halal certified? | Yes <input type="checkbox"/> No <input type="checkbox"/> -If yes, attach herewith the Halal Certification |
| 24- Is the establishment ready to use exclusive chillers and freezer rooms for Halal production? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 25- If no, explain how Halal and Non-Halal products will be separated. | Clarify: _____ |
| 26- How has the establishment resolved the challenges of Halal production? | Clarify: _____ |
| 27- What are the corrective actions taken regarding the latest Halal non-conformities? | a) _____ b) _____ |
| 28- Which Halal standard is desired to be certified with? | GSO 2055-1/2015, ES 4249/2014 <input type="checkbox"/> JAKIM <input type="checkbox"/> GSO 993/2015, ES7729/2014 <input type="checkbox"/> OIC-SMIIC 1 <input type="checkbox"/> Other: _____ <input type="checkbox"/> |
| Attachments to be submitted with form | |
| 29- Please check applicable criteria and attach herewith the following: | |
| <input type="checkbox"/> 1) Halal Complaint Sheet <input type="checkbox"/> 2) Halal Customer Satisfaction Survey <input type="checkbox"/> 3) Newest Feedback of Halal Concerned Entities <input type="checkbox"/> 4) Qualification of Halal Responsible Manager <input type="checkbox"/> 5) Halal training certificate(s) of slaughtermen and staff <input type="checkbox"/> 6) Halal Policy Statement <input type="checkbox"/> 7) Last Internal Audit Report <input type="checkbox"/> 8) Halal Risk Report | |

| Authorized Representative Signature | | | |
|-------------------------------------|-------|----------|-------|
| Name | _____ | Position | _____ |
| Signature | _____ | Date | _____ |
| Stamp | _____ | | |